

# INDEX OF CLAIMS

<input checked="" type="checkbox"/> ..... <b>Rejected</b> <input type="checkbox"/> ..... <b>Allowed</b> <input type="checkbox"/> ..... <b>(Through numeral) ... Canceled</b> <input type="checkbox"/> ..... <b>Restricted</b>	<b>N</b> ..... <b>1</b> ..... <b>1</b> ..... <b>0</b> .....	<b>Non-elected</b> <b>Interference</b> <b>Appeal</b> <b>Objected</b>
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(in)	Date	(in)	Date	(in)	Date
Original		Final		Original	
1		61		101	
2		62		102	
3		63		103	
4		64		104	
5		55		105	
6		66		106	
7		67		107	
8		58		108	
9		69		109	
10		00		110	
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37		87		137	
38		00		138	
39		00		139	
40		00		140	
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42		02		142	
43		93		143	
44		04		144	
45		95		145	
46		00		146	
47		07		147	
48		00		148	
49		08		149	
50		100		150	